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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LANDWAYK Properties Referral Company, Le (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Obya Meyer (Contact Person)
LANdmark Properties Referral Company, UC
2201-) N. Ouarshore Bud.
Tayler Black, It 32/36 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (St) 283-7280 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$25 Filing Fee & Certified Copy

MAILING ADDRESS:

Tallahassee, Florida 32314

Registration Section Division of Corporations

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS:



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the lin					
2. The Florida docum	ent/registration	number assigne	d to this limited lia	bility company is:	
L16000114	169			. 1	
3. The date this memb	per/manager wi	thdrew/resigned	or will withdraw/re	esign is: 6/27	16
4.1. Jet Me	e of Person Resign		hereby withdraw/r		
Manager	int Title)				
of this limited liabil resignation in writing		d affirm the limi	ted liability compar	ny has been notified	lofmy
Jeff!	Mun		MISTORY.	TORETAL TABLES	CINZ THAT
Signature of Disso	ociating Membe	er or Resigning I	Manager	領です	m
Filing Fee: Certified Copy:	\$25.00 (Requi \$30.00 (Optio			P 3: 25	O